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2015 AUG - 7 PM 1:44 SEUKETARY OF STATE

> K.SALY EXAMINER AUG 11 2015

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	Name of the limited liability company:	P, LLC			
2. (a)	1805 Abbey Oak Drive	(h	(b) 1805 Abbey Oak Drive		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Vienna, VA 22182		Vienna,	VA 22182	
	10/09/2012		 L120001	29100	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a	Lewis, Richard Q., III				
	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of Stat	te:	
	240 S. Pineapple Avenue			T 2	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			ÉĞ 🖺 TI	
	10th Floor			6 -	
	Sarasota , FL	34236		ETARY CHASSER	
(b	Pitchford, Jan W.			2015 AUG -7 PH 1:44 SECKETARY OF STATE TALLAH ASSEE, FLORIO	
` .	Enter name of NEW Registered Agent and/or NEW Registered	Office add	lress:	ROE F	
	240 S. Pineapple Avenue			72	
	NEW Registered Office Address:			_	
_	10th Floor			_	
	Sarasota	34236			
		·		-	
the chagent was/v	limited liability company is not organized under the landange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	f the regis ability co of the lim limited l	tered offic mpany, it i ited liabilit lability cor	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.	
~	M	Jan	nie Andre	Castaneda, Member	
	nature of a member or authorized representative of a member			Printed or typed name of signee	
provi. the ol to me	eby accept the appointment as registered agent and agrees of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I sed in writing of this change	ree to act performo d for in C hereby co	in this cap ince of my hapter 60: infirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	

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